

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 97 666 146

Total Fee Calculation

Fee Category	Total Number Entered	Number Entered	Fee	Fee Entered	Total
Basic Filing Fee	<u>27</u>	<u>27</u>	<u>690</u>	<u>690</u>	<u>690</u>
Non-Claims (+0)	<u>0</u>	<u>0</u>	<u>126</u>	<u>126</u>	<u>126</u>
Independent Claim (+1)	<u>0</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>
Multi-Dependent Claim (+0)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Surcharge	<u>0</u>	<u>0</u>	<u>130</u>	<u>130</u>	<u>130</u>
English Translation	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
TOTAL FEE CALCULATION				<u>946</u>	<u>946</u>

Fees due upon filing the application

Total Filing Fees Due = \$ 946.00

Less Filing Fees Submited = \$ ✓

BALANCE DUE = \$ 946.00

J. W. W.
Office of Initial Patent Examination